

7001 2510 0008 6348 6082

U.S. Postal Service

# **CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

1. Name of Addressee	2. Address	3. City, State, ZIP+4	4. Post Office	5. ZIP Code	6. ZIP+4 Code
7. Name of Recipient	8. Address	9. City, State, ZIP+4	10. Post Office	11. ZIP Code	12. ZIP+4 Code

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Total Price

Sent To	United States Department of State
Office of Passport Policy and Advisory Services	
Street, Apt. or PO Box	2100 Pennsylvania Ave. N.W., 3 <sup>rd</sup> Floor
City, State	Washington, DC 20037